

SITE NAME: STERIS, Calgon Vestal Division
ATTN: Environmental Manager
5035 Manchester Avenue
St. Louis, MO 63110
EPA ID NO: EPA ID: MOD 056 961 105 MO ID: 004503



1997 Hazardous Waste Report

**FORM
IC**

IDENTIFICATION AND CERTIFICATION

Sec. 1	Site name and location address. Check the box <input type="checkbox"/> in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instructions page 7.
---------------	--

A. EPA ID No.
Same as label ☒ or →

B. County
Same as label ☐ or → City of St. Louis

C. Site/company name . STERIS
Same as label ☐ or → Calgon Vestal Div.

D. Has the site name associated with this EPA ID changed since 1995?
☒ 1 Yes ☐ 2 No

E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description.
Same as label ~~C~~ or →

F. City, town, village
Same as label ☒ or →

G. State
Same as label ☒ or →

H. Zip Code
Same as label X or →

Sec. II	Mailing address of site. Instructions page 7.
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A. Is the mailing address the same as the location address? ☐ 1 Yes (SKIP TO SEC. III) ☒ 2 No (CONTINUE TO BOX B)

B. Number and street name of mailing address
P.O. Box 147

C. City, town, village
St. Louis

D. State LMIO

E. Zip Code 16161-1047

Sec. III	Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7.
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A. Last Name	First name	M.I.
Hancock	John	J.

B. Title
EHS
Specialist

C. Telephone Number

3	1	4	5	3	5	-	1	7	9	6
						Extension				
						1 7 9 6				

Sec. IV	<p>"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.</p>	
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A. Last Name	First name	M.I.
Jackson	Eldon	R.

B. Title	EHS Manager
----------	-------------

C. Signature Elden R Jackson

D. Date of signature 02 27 98
Month Day Year



R00126085

RCRA RECORDS CENTER

BRS ~~values~~ data entered

BY EB Tri-Pow

ON 8/12/98

CHKO APR 06 1999

TruCo/Cgt

Over →

EPA ID NO. M0D 056 961 105

Sec. V Generator status. Instructions begin on page 8.**A. 1997 RCRA generator status**

(CHECK ONE BOX BELOW)

- ☒ 1 LQG
☐ 2 SQG
☐ 3 CESQG
☐ 4 Non-generator (CONTINUE TO BOX B)

} SKIP TO SEC. VI

B. Reason for not generating

(CHECK ALL THAT APPLY)

- ☐ 1 Never generated
☐ 2 Out of business
☐ 3 Only excluded or delisted waste
☐ 4 Only non-hazardous waste
☐ 5 Periodic or occasional generator
☐ 6 Waste minimization activity
☐ 7 Other (SPECIFY IN COMMENTS BOX BELOW)

Sec. VI On-site waste management status. Instructions page 10.**A. Storage subject to RCRA permitting requirements**1**B. Treatment, disposal, or recycling subject to RCRA permitting requirements**1

Comments:

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U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12)

Lab Waste Contains Methanol & Acetonitrile

B. EPA hazardous waste code
(page 12)

D1001 F003

C. State hazardous waste code (page 13)

D. SIC code
(page 13)

2841

E. Origin code

System Type

L M

F. Source code
(page 14)

A 94

G. Point of
measurement
(p. 14)

L

H. Form code
(page 14)

B 003

I. RCRA-radioactive mixed
(page 14)

2

Sec. II

A. Quantity generated in 1997
(page 15)

2104.0

B. UOM
(page 15)

Density

□ 1 lbs/gal □ 2 sg

C. Did this site do any of the following to this waste: treat on site,
dispose on site, recycle on site, or discharge to a sewer/POTW?
(page 15)
☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type
(page 16)

M

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

2104.0

ON-SITE PROCESS SYSTEM 2

On-site process system type
(page 16)

M

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

2104.0

Sec. III

A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility waste was shipped to
(page 17)

ILD 0000 0000 471

C. System type
shipped to (p. 17)

M 051

D. Off-site availability
code (page 17)

L

E. Total quantity shipped in 1997 (page 17)

2104.0

Site 2

B. EPA ID No. of facility waste was shipped to
(page 17)C. System type
shipped to (p. 17)

M

D. Off-site availability
code (page 17)

L

E. Total quantity shipped in 1997 (page 17)

Site 3

B. EPA ID No. of facility waste was shipped to
(page 17)C. System type
shipped to (p. 17)

M

D. Off-site availability
code (page 17)

L

E. Total quantity shipped in 1997 (page 17)

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Sec. I A. Waste description (page 12)

Out-Of-Date Materials: Contains Phosphoric Acid & Isopropenol

B. EPA hazardous waste code (page 12) D001 D022

C. State hazardous waste code (page 13)

D. SIC code (page 13)

2841

E. Origin code (page 13)

System Type
M

F. Source code (page 14)

A5E

G. Point of measurement (p. 14)

1

H. Form code (page 14)

B105

I. RCRA-radioactive mixed (page 14)

2

Sec. II A. Quantity generated in 1997 (page 15)

22320

B. UOM (page 15)

Density 1

☐ 1 lbs/gal ☐ 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1997 (page 16)

22320

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1997 (page 16)

22320

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility waste was shipped to (page 17)

11D 000 608 471

C. System type shipped to (p. 17)

M 041

D. Off-site availability code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

22320

Site 2

B. EPA ID No. of facility waste was shipped to (page 17)

11D 000 608 471

C. System type shipped to (p. 17)

M 041

D. Off-site availability code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

22320

Site 3

B. EPA ID No. of facility waste was shipped to (page 17)

11D 000 608 471

C. System type shipped to (p. 17)

M 041

D. Off-site availability code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

22320

Comments:

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Sec. I A. Waste description (page 12)

Cut-Off Date Material: Flammable Aerosols

B. EPA hazardous waste code
(page 12)

D0001

C. State hazardous waste code (page 13)

D. SIC code
(page 13)

2841

E. Origin code
(page 13) System Type

M

F. Source code
(page 14)

A59

G. Point of
measurement
(p. 14)H. Form code
(page 14)

B901

I. RCRA-radioactive mixed
(page 14)

2

Sec. II A. Quantity generated in 1997
(page 15)

539.0

B. UOM
(page 15)

L

Density

□ 1 lbs/gal □ 2 sg

C. Did this site do any of the following to this waste: treat on site,
dispose on site, recycle on site, or discharge to a sewer/POTW?
(page 15)

□ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type
(page 16)

M

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

ON-SITE PROCESS SYSTEM 2

On-site process system type
(page 16)

M

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)

☒ 1 Yes (CONTINUE TO BOX B) □ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility waste was shipped to
(page 17)

ILD 000 605 471

C. System type
shipped to (p. 17)

M041

D. Off-site availability
code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

539.0

Site 2

B. EPA ID No. of facility waste was shipped to
(page 17)C. System type
shipped to (p. 17)

M

D. Off-site availability
code (page 17)

E. Total quantity shipped in 1997 (page 17)

Site 3

B. EPA ID No. of facility waste was shipped to
(page 17)C. System type
shipped to (p. 17)

M

D. Off-site availability
code (page 17)

E. Total quantity shipped in 1997 (page 17)

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Sec. I A. Waste description (page 12) <i>Used Fluorescent Light Bulbs</i>					
B. EPA hazardous waste code (page 12) <i>D019</i>			C. State hazardous waste code (page 13)		
D. SIC code (page 13) <i>2841</i>		E. Origin code (page 13) System Type <i>M</i>	F. Source code (page 14) <i>A93</i>	G. Point of measurement (p. 14) <i>1</i>	H. Form code (page 14) <i>B319</i>
I. RCRA-radioactive mixed (page 14) <i>2</i>					

Sec. II A. Quantity generated in 1997 (page 15) <i>580.0</i>		B. UOM (page 15) Density <i>1</i> lbs/gal <input type="checkbox"/> 2 sg <input type="checkbox"/>	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16)	On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16)	

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>ILB 000 608 471</i>	C. System type shipped to (p. 17) <i>M012</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>580.0</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)

Comments:

Section I, Box H: Fluorescent Light Bulbs

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Sec. I A. Waste description (page 12)

Lab Waste: Chloroform

B. EPA hazardous waste code (page 12) D1022

C. State hazardous waste code (page 13)

D. SIC code (page 13)

2841

E. Origin code (page 13) 11
System Type M

F. Source code (page 14) A5E

G. Point of measurement (p. 14) 1

H. Form code (page 14) B1001

I. RCRA-radioactive mixed (page 14) 2

Sec. II A. Quantity generated in 1997 (page 15)

185.9

B. UOM (page 15) 1
Density 1.48
☐ 1 lbs/gal ☐ 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1997 (page 16)

185.9

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1997 (page 16)

185.9

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
Site 1	<u>I41D C100 610E 4711</u>	<u>M1061</u>	<u>11</u>	<u>185.9</u>
Site 2		<u>M</u>	<u>1</u>	
Site 3		<u>M</u>	<u>1</u>	

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Sec. I A. Waste description (page 12) <i>Lab Wastes Phenolic Compounds</i>					
B. EPA hazardous waste code (page 12) <i>D002</i>			C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) <i>28171</i>	E. Origin code (page 13) <i>1</i> System Type <i>M</i>	F. Source code (page 14) <i>A5B</i>	G. Point of measurement (p. 14) <i>1</i>	H. Form code (page 14) <i>B1091</i>	I. RCRA-radioactive mixed (page 14) <i>2</i>

Sec. II A. Quantity generated in 1997 (page 15) <i>11729.0</i>		B. UOM (page 15) <i>1</i> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
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ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>I4D 0100 608 471</i>	C. System type shipped to (p. 17) <i>M041</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>11729.0</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) _____
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) _____

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Sec. I A. Waste description (page 12) <i>Out-Of-Date Material: Contains Hydrogen Peroxide & Peracetic Acid</i>					
B. EPA hazardous waste code (page 12) <i>D001 D002</i>			C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) <i>2841</i>	E. Origin code (page 13) System Type <i>1</i> <i>M</i>	F. Source code (page 14) <i>58</i>	G. Point of measurement (p. 14) <i>1</i>	H. Form code (page 14) <i>B105</i>	I. RCRA-radioactive mixed (page 14) <i>2</i>

Sec. II A. Quantity generated in 1997 (page 15) <i>908.9</i>		B. UOM (page 15) <i>1</i> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)
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ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>ILD 0000 000 471</i>	C. System type shipped to (p. 17) <i>M041</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>908.9</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____

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Sec. I A. Waste description (page 12) <i>Lab Waste: Contains Hydrochloric Acid</i>					
B. EPA hazardous waste code (page 12) <i>D002</i>			C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) <i>2841</i>	E. Origin code (page 13) <i>1</i> System Type <i>M</i>	F. Source code (page 14) <i>A5B</i>	G. Point of measurement (p. 14) <i>1</i>	H. Form code (page 14) <i>B001</i>	I. RCRA-radioactive mixed (page 14) <i>2</i>

Sec. II A. Quantity generated in 1997 (page 15) <i>152.9</i>		B. UOM (page 15) <i>1</i> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>14100006000471</i>	C. System type shipped to (p. 17) <i>M092</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>152.9</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) _____
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) _____

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Sec. I		A. Waste description (page 12) <i>Lab Waste: Contains Sodium Nitrate Solution</i>				
B. EPA hazardous waste code (page 12) <i>D001</i>		C. State hazardous waste code (page 13)				
D. SIC code (page 13) <i>2841</i>	E. Origin code (page 13) <i>1</i>	F. Source code (page 14) <i>A52</i>	G. Point of measurement (p. 14) <i>1</i>	H. Form code (page 14) <i>B001</i>	I. RCRA-radioactive mixed (page 14) <i>2</i>	
Sec. II		A. Quantity generated in 1997 (page 15) <i>47.6</i>				
B. UOM (page 15) <i>1</i>		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)				
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2				
On-site process system type (page 16) <i>M</i>		Quantity treated, disposed, or recycled on site in 1997 (page 16)		On-site process system type (page 16) <i>M</i>		Quantity treated, disposed, or recycled on site in 1997 (page 16)
Sec. III		A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>ILD0009602471</i>	C. System type shipped to (p. 17) <i>M042</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>47.6</i>		
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)		
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)		
Comments:						

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ATTN: Environmental Manager
5035 Manchester Avenue
St. Louis, MO 63110
EPA ID NO: EPA ID: MOD 056 961 105 MO ID: 004503



U.S. ENVIRONMENTAL
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1997 Hazardous Waste Report

FORM
GM

WASTE GENERATION
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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) <i>Out-Of-Date Material: Contains Hydrochloric Acid & Phosphoric Acid</i>					
B. EPA hazardous waste code (page 12) <i>00002</i>			C. State hazardous waste code (page 13)		
D. SIC code (page 13) <i>2841</i>	E. Origin code (page 13) System Type <i>M</i>	F. Source code (page 14) <i>A58</i>	G. Point of measurement (p. 14) <i>L</i>	H. Form code (page 14) <i>B105</i>	I. RCRA-radioactive mixed (page 14) <i>2</i>

Sec. II A. Quantity generated in 1997 (page 15) <i>10192.0</i>		B. UOM (page 15) Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16)	On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16)

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>ILD 000 608 471</i>	C. System type shipped to (p. 17) <i>M 6 9 2</i>	D. Off-site availability code (page 17) <i>L</i>	E. Total quantity shipped in 1997 (page 17) <i>10192.0</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)

Comments:

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Sec. I A. Waste description (page 12) <i>Out-Of-Date Material: Contains Sodium Hydroxide</i>					
B. EPA hazardous waste code (page 12) <i>110102</i>			C. State hazardous waste code (page 13)		
D. SIC code (page 13) <i>2841</i>	E. Origin code (page 13) System Type <i>1</i> <i>M</i>	F. Source code (page 14) <i>A58</i>	G. Point of measurement (p. 14) <i>1</i>	H. Form code (page 14) <i>B1116</i>	I. RCRA-radioactive mixed (page 14) <i>2</i>

Sec. II A. Quantity generated in 1997 (page 15) <i>6776.0</i>		B. UOM (page 15) <i>1</i> Density <i>1.1</i> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) <i>6776.0</i>	On-site process system type (page 16) <i>M</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) <i>6776.0</i>	

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>110102 110102 110102 110102</i>	C. System type shipped to (p. 17) <i>M1012</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>6776.0</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <i>110102 110102 110102 110102</i>	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>6776.0</i>
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <i>110102 110102 110102 110102</i>	C. System type shipped to (p. 17) <i>M</i>	D. Off-site availability code (page 17) <i>1</i>	E. Total quantity shipped in 1997 (page 17) <i>6776.0</i>

Comments:

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EPA ID NO: EPA ID: MOD 056 961 105 MO ID: 004503

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Sec. I A. Waste description (page 12) <i>Lab Wastes Perchloric Acid</i>					
B. EPA hazardous waste code (page 12) <i>D10191 D10192</i> <i>D10193</i>			C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) <i>2841</i>	E. Origin code (page 13) System Type <i>[M]</i>	F. Source code (page 14) <i>A518</i>	G. Point of measurement (p. 14) <i>[1]</i>	H. Form code (page 14) <i>[B1011]</i>	I. RCRA-radioactive mixed (page 14) <i>[2]</i>

Sec. II A. Quantity generated in 1997 (page 15) _____ <i>10</i> ____ <i>[9]</i>		B. UOM (page 15) Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
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ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <i>[M]</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	On-site process system type (page 16) <i>[M]</i>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <i>I14D 1019 1018 4121</i>	C. System type shipped to (p. 17) <i>[M1912]</i>	D. Off-site availability code (page 17) <i>[1]</i>	E. Total quantity shipped in 1997 (page 17) _____ <i>10</i> ____ <i>[9]</i>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>[M]</i>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <i>[M]</i>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____

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Sec. I A. Waste description (page 12)

Lab Waste: Barium Compound

B. EPA hazardous waste code
(page 12)

D002 D015

C. State hazardous waste code (page 13)

D. SIC code
(page 13)

2841

E. Origin code
(page 13) System Type

M

F. Source code
(page 14)

A58

G. Point of measurement
(p. 14)

1

H. Form code
(page 14)

B1011

I. RCRA-radioactive mixed
(page 14)

2

Sec. II A. Quantity generated in 1997
(page 15)

3.6

B. UOM
(page 15)

Density

1 lbs/gal 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW?
(page 15)

1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type
(page 16)

M

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

3.6

ON-SITE PROCESS SYSTEM 2

On-site process system type
(page 16)

M

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

3.6

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)

1 Yes (CONTINUE TO BOX B) 2 No (FORM IS COMPLETE)

Site 1 B. EPA ID No. of facility waste was shipped to
(page 17)

1110 0000 0000 471

C. System type
shipped to (p. 17)

M012

D. Off-site availability
code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

3.6

Site 2 B. EPA ID No. of facility waste was shipped to
(page 17)

C. System type
shipped to (p. 17)

M

D. Off-site availability
code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

Site 3 B. EPA ID No. of facility waste was shipped to
(page 17)

C. System type
shipped to (p. 17)

M

D. Off-site availability
code (page 17)

1

E. Total quantity shipped in 1997 (page 17)

Comments:

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Sec. I		A. Waste description (page 12) <i>Lab Waste Contains Acetonitrile & Tetrahydrofuran</i>				
B. EPA hazardous waste code (page 12) 10001 0213		C. State hazardous waste code (page 13) _____				
D. SIC code (page 13) 2841	E. Origin code (page 13) System Type M	F. Source code (page 14) A53	G. Point of measurement (p. 14) 1	H. Form code (page 14) B1011	I. RCRA-radioactive mixed (page 14) 2	
Sec. II		A. Quantity generated in 1997 (page 15) 498.6				
B. UOM (page 15) Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)				
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____
Sec. III						
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)						
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) I410 0000 6013 4711	C. System type shipped to (p. 17) M0411	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) 498.6		
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____		
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____		
Comments:						